Death of Children due to Malnutrition in Melghat, Maharashtra

983. SHRI SUSHILKUMAR SAMBHAJI RAO SHINDE:

SHRIMATI VEENA VERMA:

Will the Minister of WELFARE be pleased to state

(a) whether Government's attention has been drawn to a report in the "Blitz Weekly" of August 26, 1996, reporting deaths of 500 and odd children due to malnutrition in Melghat region of Maharashtra;

(b) if so, whether Government have secured an inquiry report or caused an inquiry into these malnutrition deaths of tribal children;

(c) if so, the details of the findings; and

(d) the Government's reaction thereto?

THE MINISTER OF WELFARE (SHRI BALWANTSINGH RAMOOWALIA): (a)Yes, Sir.

(b) and (c)The Government of Maharashtra was requested to give a report in the matter. An abstract of the main findings based on the report received from the Government of Maharashtra regarding deaths of children in Amaravati District of Maharashtra, in which the Melghat region falls, is as follows:—

(I) Total No. of deaths analysed according to the cause of death.

S. No.	Cause of death	No. of deaths
1.	Fever	11
2.	Pneumonia	33
3.	Dysentry	39
4	Diarrahoea	3
5.	Tuberculosis	3
6.	Pre-mature births	42
7.	Due to Accidental causes or due to biles etc.	61
	TOTAL	212

II. Tola! number of deaths as per age-group of the children who died—

Age-Group	No. of deaths
0-6 months	S3
6 months to 1 year	*19*
1-6 years	110

The largest number of deaths occurred in the Month of May 1996 when 87 deaths were reported. The number fell to 67 in June, 1996 and to 58 in July, 1996.

While it emerged. that a significant number of children had died due so various diseases, the Government of Maharashtra has also admitted that the underlying major cause for the deaths was the generally weak condition of some of the children which made them susceptible to disease. Another important reason which was identified was the dunking of non-potable water by the tribals in preference to the chlorinated water because of the change in the taste of water. Certain unhygienic habits of the tribals in Amasavati also led to a higher incidence of water borne diseases.

(d) A Committee of Secretaries of she Government of Maharashtra comprising the Secretary. Women & Child Development, Secretary, Public Health, Commissioner, Family Planning. led by the Secretary. Tribal Welfare, visited the area to ensure setting up of rescue camps with dectors, staff and sufficient stocks of medicines fanning out of trained Hamlet Voluntary Workers into the tribal hamles for disinfecting drinking water. providing emergency services and increasing the supply of supplementary nutrition provided for children and lactating mothers under the ICDS Programme. Further disbursement of consumption', finance in the area was also ensured. Many long-term measures are also envisaged such as regular health check-ups in schools and Anganwadis, training of Anganwadi workers in Primary Health Care by she Health Department and supply of medicine-kit to them, installation of incubators with attendant staff in every Public health Centre oi the effected Dharni and Dhikkaldhara

blocks of Amaravati district, community special work through NGOs and imparting of health education in the local tribal languages to the tribals by a District Health Education Team.

Illegal Copper Trade

984. SHRI SURYABHAN PATIL VAHADANE: Will the Minister of COMMERCE be pleased to state:

(a) whether Government's attention has been drawn towards a news-item published in the Hindustan Times dated 3rd October, 1996. with a heading "Illegal copper trade has cost crores" mentioning another scam in the offing and cheating of the Government exchequer of hundred crores of rupees each year; and

(b) if so, the details of the case and the action Government propose to take against the defaulters and to prevent the cheating firms from doing their business further?

THE MINISTER OF STATE OF THE MINISTRY OF COMMERCE (SHRI BOLLA BULLI RAMAIAH): (a) and (b) The Information is being collected and will be laid on the Table of the House.

De-licencing of industries

985. SHRI JAGIR SINGH DARD:
DR. SHRIKANT RAMCHANDRA JICHKAR:

Will the Minister of INDUSTRY be pleased to refer to his declaration that there are some industries for de-licensing in the near future and state:

(a) the status of these proposals; and

(b) the names of industries which will be dcliccnsed in the near future?

THE MINISTER OF INDUSTRY (SHRI MURASOLI MARAN): (a) and (b) The Government have reviewed the list of industries under compulsory licensing and decided to delicense "Entertainment Electronic-Industries" and the review is a continuous process.

Sick industrial units

986. SHRI K. RAHMAN KHAN: Will the Minister of INDUSTRY be pleased to state:

(a) whether it is a fact that a number of industrial units are lying sick in the country;'

(b) if so, the total number of such sick units. State-wise;

(c) whether Government have any plan to rejuvenate these sick industrial units;

(d) if so, the details thereof; and

(c) if not, the reasons therefor?

THE MINISTER OF INDUSTRY (SHRI MURASOLI MARAN): (a) and (b) Data on sick industrial units assisted by Banks in the country is complied by the Reserve Bank of India. According to the latest RBI data available, the statewise distribution of sick industrial units as at the end of March 95 is at Statement I. *(See* below)

(c) to (e) The Government has taken a number of steps for revival of sick industrial units. Some of the important steps are at Stutement-II.

Statement-I

State-wise distribution of sick SSI and Non-SSI units as at the end of March, 1995.

State-Union Territory	No. of sick SSI Units	No. of sick Non-SSI Units
Assam	17984	31
Meghalaya	367	2
Mizoram	162	—
Bihar	26749	53
Arunachal Pradesh	140	—
West Bengal	50500	224
Nagaland	1728	—
Manipur	2370	—
Orissa	20498	44
Sikkim	96	1
Tripura	921	5
A&N Islands	28	—
Uttar Pradesh	35988	171
Delhi	5712	23
Punjab	2473	38
Haryana	2339	62